

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Western District of North Carolina
(State)

Case number (*if known*): _____

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a *joint* case--and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
1. Your full name	Moussa First name	Hortense First name	
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Middle name	Gisele Middle name	
Bring your picture identification to your meeting with the trustee.	Bamba Last name	Bamba Last name	
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2. All other names you have used in the last 8 years	First name	First name	
Include your married or maiden names.	Middle name	Middle name	
	Last name	Last name	
	First name	First name	
	Middle name	Middle name	
	Last name	Last name	
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 2873 OR 9xx - xx - _____	xxx - xx - 4506 OR 9xx - xx - _____	

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and *doing business as* names

About Debtor 1:

I have not used any business names or EINs.

Mus Macaron, LLC

Business name

Business name

47 - 5208278
EIN

EIN - _____

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Gigi's Macaron, LLC

Business name

Business name

47 - 5208215
EIN

EIN - _____

5. Where you live

15119 Callow Forest Dr.

Number Street

Charlotte, NC 28273

City State Zip Code

Mecklenburg

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State Zip Code

If Debtor 2 lives at a different address:

Number Street

City State Zip Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State Zip Code

6. Why are you choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known) _____

Part 2:**Tell the Court About Your Bankruptcy Case****7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How will you pay the fee

- I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A)
- I request that my fee be waived.** (You may request this option only if you are filing for

9. Have you filed for bankruptcy within the last 8 years?

- No

- Yes

District _____	When _____ MM / DD / YYYY	Case number _____
District _____	When _____ MM / DD / YYYY	Case number _____
District _____	When _____ MM / DD / YYYY	Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- No

- Yes

Debtor _____	Relationship to you _____	
District _____	When _____ MM / DD / YYYY	Case number, if known _____
Debtor _____	Relationship to you _____	
District _____	When _____ MM / DD / YYYY	Case number, if known _____

11. Do you rent your residence?

- No

Go to line 12.

- Yes

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No Go to line 12.

Yes Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part time business? No Go to part 4.

Yes

Name and location of business

Gigi's Macaron, LLC

Name of business, if any

1111 Metropolitan Ave.

Number Street

Ste. 120

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Charlotte

City

NC

28204

State Zip Code

Check the appropriate box to describe your business:

Health Care Business (as defined in U.S.C. § 101(27A))

Single Asset Real Estate (as defined in U.S.C. § 101(51B))

Stockbroker (as defined in U.S.C. § 101(53A))

Commodity Broker (as defined in U.S.C. § 101(6))

None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in U.S.C. § 1116(1)(B).

No I am not filing under Chapter 11.

No I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes I am filing under Chapter 11, and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No

Yes What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property? _____

Number Street

City

State

Zip Code

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known) _____

Part 5:**Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again

About Debtor 1:*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?**

16a. Are your debts primarily consumer debts? Consumer debts are defined in U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

- No
 Yes

18. How many creditors do you estimate that you owe?

- 1 - 49
 50 - 99
 100 - 199
 200 - 999

- 1,000 - 5,000
 5,001 - 10,000
 10,001 - 25,000

- 25,001 - 50,000
 50,001 - 100,000
 More than 100,000

19. How much do you estimate your assets to be worth?

- \$0 - \$50,000
 \$50,001 - \$100,000
 \$100,001 - \$500,000
 \$500,001 - \$1,000,000

- \$1,000,001 - \$10 million
 \$10,000,001 - \$50 million
 \$50,000,001 - \$100 million
 \$100,000,001 - \$500 million

- \$500,000,001 - \$1 billion
 \$1,000,000,001 - \$10 billion
 \$10,000,000,001 - \$50 billion
 More than \$50 billion

20. How much do you estimate your liabilities to be?

- \$0 - \$50,000
 \$50,001 - \$100,000
 \$100,001 - \$500,000
 \$500,001 - \$1,000,000

- \$1,000,001 - \$10 million
 \$10,000,001 - \$50 million
 \$50,000,001 - \$100 million
 \$100,000,001 - \$500 million

- \$500,000,001 - \$1 billion
 \$1,000,000,001 - \$10 billion
 \$10,000,000,001 - \$50 billion
 More than \$50 billion

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ M. Bamba

Signature of Debtor 1

/s/ H. Bamba

Signature of Debtor 2

Executed on 09/29/2017

MM / DD / YYYY

Executed on 09/29/2017

MM / DD / YYYY

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by U.S.C. § 342(b) and, in a case which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

If you are not represented by an attorney, you do not need to file this page

<input checked="" type="checkbox"/>	<u>/s/ BLWhite</u>	Date <u>9/29/2017</u>
Signature of Attorney for Debtor		
<u>Barbara L. White</u>		
Printed name		
<u>Barbara L. White, Attorney at Law</u>		
Firm name		
Number	<u>1101 South Blvd.</u>	
Street		
<u>Ste. 201</u>		
City	State	Zip Code
Contact phone <u>704-374-9411</u>		Email address <u>barbara@barbaralwhite.com</u>
Bar number	<u>10105, NC</u>	
State		

Debtor 1	Moussa	Bamba
	First Name	Middle Name
		Last Name
Debtor 2 (Spouse, if filing)	Hortense	Gisele
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the:	Western	District of North Carolina (State)
Case number (if known)		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No Go to Part 2.
 Yes. Where is the property?

1.1 15119 Callow Forest Dr.
Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?
\$ 296,868.00 \$ 50,576.00

Charlotte, NC 28273
City State Zip Code

Mecklenburg
County

Who has a interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenancy by the entirety

Check of this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number: 20123420

If you own or have more than one, list here:

1.2 206 Oakton Glen
Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?
\$ 130,200.00 \$ 0.00
(taxable value)

Charlotte, NC 28262
City State Zip Code

Mecklenburg
County

Who has a interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Joint tenants

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number: 02123420

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known)

1.3

Street address, if available, or other description

City _____ State _____ Zip Code _____

County _____

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has a interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check of this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here -> \$ 50,576.00

Part 2: Describe Your Vehicles

Do you own, lease, or have equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, sport utility vehicles, motorcycles

- No
- Yes

3.1 Make: Mercedes

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 4,000.00 (CarMax) \$ 0.00

Approximate mileage: 132,278

Check if this is community property (see instructions)

Other information:

VIN: WDBUF87X28B216044

If you own or have more than one, list here:

3.2 Make: Nissan

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 3,800.00 \$ 3,800.00

Approximate mileage: 132,990

Check if this is community property (see instructions)

Other information:

VIN: NqBU28B84N329966

Case number (if known) _____

3.3 Make: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

Model: _____

Year: _____

Approximate mileage: _____

- Check if this is community property (see instructions)**

\$ _____ \$ _____

Other information:

3.4 Make: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

Model: _____

Year: _____

Approximate mileage: _____

- Check if this is community property (see instructions)**

\$ _____ \$ _____

Other information:

_____**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

4.1 Make: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

Model: _____

Year: _____

- Check if this is community property (see instructions)**

\$ _____ \$ _____

Other information:

If you own or have more than one, list here:

4.2 Make: _____

Who has an interest in the property? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amounts of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

Model: _____

Year: _____

- Check if this is community property (see instructions)**

\$ _____ \$ _____

Other information:

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ->

\$ 3,800.00

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.....**Furniture, Appliances, Lawn furniture,**\$ **6,750.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.....**TV's, Blue Ray Amplifier**\$ **525.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....

\$

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....

\$

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....**Everyday clothing, outerwear, work clothes, shoes, accessories**\$ **300.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**Wedding rings**\$ **2,000.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe.....

\$

15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here -> **\$ 9,575.00**

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known)

Part 4:**Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....Cash: \$ 0.00**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1 Checking account:	<u>Bank of America xxx4172</u>	\$ <u>12.40</u>
17.2 Checking account:	<u>Bank of America xxx4670</u>	\$ <u>154.93</u>
17.3 Savings account:	<u>Bank of America xxx8475</u>	\$ <u>9.91</u>
17.4 Savings account:	<u>Bank of America ckgs. 6349</u>	<u>2.75</u>
17.5 Savings account:	<u>UW Credit Union sv. xxx7702 (joint)</u>	\$ <u>134.22</u>
17.6 Savings Account	<u>UW Credit Union sv. xxx7701</u>	\$ <u>173.18</u>
17.7 Other financial account:	<u>Sun Trust ck. xxx4107</u>	\$ <u>15,007.79</u>
17.8 Other financial account:	<u>Bank of America (overdraft account) xxx4482</u>	\$ <u>10.00</u>
17.9 Other financial account	<u>Bank of America sv xxx1036</u>	<u>2.47</u>
17.10 Other financial account	<u>Bank of America sv. 6352</u>	<u>0.01</u>
17.11 Other financial account	<u>New Dominion Money Market. xxx3171</u>	\$ <u>3,417.40</u>
17.12 Other financial acct:	<u>New Dominion Checking xxx8388</u>	<u>300.00</u>
17..13 Other financial acct	<u>Sun Trust ckg. xxx3943</u>	\$ <u>5.35</u>
17.14 Other financial account	<u>Sun Trust xxx3950</u>	<u>43.79</u>
17.15 Other financial account	<u>Sun Trust xxx5935 sv.</u>	<u>1,000.00</u>
17.16 Other financial account	<u>Sun Trust xxx5950 svg.</u>	<u>175.00</u>
17.17 Other financial account	<u>Sun Trust money market xxx5943</u>	<u>95.00</u>
17.18 Other financial account	<u>Truliant ckg. xxx0744</u>	<u>14.78</u>
17.19 Other financial account	<u>Truliant savings xxx0577</u>	<u>22.72</u>
17.20 Other financial account	<u>Truliant xxx8728</u>	<u>5.00</u>
17.21 Other financial account	<u>Truliant xxx8736 svg</u>	<u>5.00</u>
17.22 Other financial acct:	<u>Truliant xxx9655 svg.</u>	<u>10.00</u>
17.23 Other financial acct.	<u>Truliant Dollar Cert. xxx0593</u>	<u>347.16</u>
17.24 Other financial acct.	<u>Truliant Dollar Cert. xxx 0600</u>	<u>318.62</u>

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

Fidelity Investments	\$ 481.39
	\$
	\$

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

Gigi's Macaron, LLC (W) 100 % \$ 0.00

Mus Macaron, LLC (H) 100 % \$ 0.00

 % \$

Official Form 106A/B
Debtor 1 **Moussa**

First Name **Middle Name** **Bamba** Last Name

Schedule A/B: Property

Case number (if known)

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20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them

No

Yes..... Issuer name:

\$ _____
\$ _____
\$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each

account separately	Type of account	Institution name:	
	401(k) or similar plan:	<u>Oppenheimer xxx4051</u>	\$ <u>121,401.43</u>
	Pension plan:		\$ _____
	IRA:	<u>Fidelity xxx4765</u>	\$ <u>.05</u>
	Retirement account		\$ _____
	Keogh:		\$ _____
	Additional account:		\$ _____
	Additional account:		\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

Electric:		\$ _____
Gas:		\$ _____
Heating oil:		\$ _____
Security deposit on rental unit:		\$ _____
Prepaid rent:		\$ _____
Telephone:		\$ _____
Water:		\$ _____
Rented furniture:		\$ _____
Other:	<u>Security deposit on commercial rental</u>	\$ <u>3,898.67</u>

23. Annuities (a contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

\$ _____
\$ _____

\$ _____

Official Form 106A/B
Debtor 1 **Moussa**
First Name

Schedule A/B: Property
Bamba

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Case number (if known) _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

[NC 529 Plan 2F63](#) \$ 3,030.66

[NC 529 Plan 2F60](#) \$ 3,084.67

[NC 529 Plan 2F62](#) \$ 2,873.10

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them... \$ _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them... \$ _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them... [Le Macaron Development, LLC \(franchise\)](#) \$ 0.00

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \$ _____

State: \$ _____

Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

Alimony: \$ _____

Maintenance: \$ _____

Support: \$ _____

Divorce settlement: \$ _____

Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information.....

\$ _____

Official Form 106A/B
Debtor 1 **Moussa**

Schedule A/B: Property
Bamba

Case number (if known) _____

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31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA), credit, homeowner's or renter's insurance

No

Yes. Name the insurance company of each policy and list its value..

Company name:	Beneficiary	Surrender or refund value
State Farm Term (H)	Wife	\$ 0.00
State Farm Term (W)	Husband	\$ 0.00
		\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information.....

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

Claiborne Servicing & Contracting/Roddy Claiborne, 6001 Sullins Rd., Charlotte, NC 28214

\$ 3,500.00

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Give specific information.....

\$ _____

35. Any financial assets you did not already list

No

Yes. Give specific information.....

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here -> \$ 159,537.40

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

38. Accounts receivable or commissions you already earned

No

Yes. Describe.....

\$ _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No
 Yes. Describe.....

\$ _____

Official Form 106A/B
Debtor 1 **Moussa**

First Name

Schedule A/B: Property
Bamba

Middle Name

Last Name

Case number (if known) _____

Page 8

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe.....

\$ _____

41. Inventory

No
 Yes. Describe.....

\$ _____

42. Interest in partnerships or joint ventures

No
 Yes. Describe.....

Name of entity

% of ownership:

% \$ _____

% \$ _____

% \$ _____

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.....

\$ _____

44. Any business-related property you did not already list

No
 Yes. Give specific information.....

Issuer name and description:

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here -> **\$ 0.00**

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No

Yes.....

\$ _____

Official Form 106A/B
Debtor 1 Moussa

First Name

Schedule A/B: Property

Bamba

Last Name

Case number (if known) _____

Page 9

48. Crops--either growing or harvested

No

Yes. Give specific information.....

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No

Yes.....

\$ _____

50. Farm and fishing supplies, chemicals, and feed

No

Yes.....

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

No

Yes. Give specific information.....

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here -> \$ 0.00

Part 7: Describe All Property You Own or Have an Interest In That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

\$ _____

Yes. Give specific information.....

\$ _____

\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here -> \$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... -> \$ 50,576.00

56. Part 2: Total vehicles, line 5 \$ 3,800.00

57. Part 3: Total personal and household items, line 15 \$ 9,575.00

58. Part 4: Total financial assets, line 36 \$ 159,537.40

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61..... \$ 172,912.40 Copy personal property total -> + \$ 172,912.40

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$ 223,488.40

Official Form 106A/B

Schedule A/B: Property

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Fill in this information to identify your case:

Debtor 1	<u>Moussa</u> First Name	<u>Bamba</u> Middle Name	<u>Bamba</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Hortense</u> First Name	<u>Gisele</u> Middle Name	<u>Bamba</u> Last Name
United States Bankruptcy Court for the:	<u>Western</u>	District of (State)	<u>North Carolina</u>
Case number (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: <u>15119 Calow Forest Dr., Charlotte, NC 28273</u>	\$ <u>50,576.00</u>	<input checked="" type="checkbox"/> \$ <u>50,576.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(1)</u>
Line from Schedule A/B: <u>1.1</u>			
Brief description: <u>206 Oakton Glen, Charlotte, NC 28262</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: <u>1.2</u>			
Brief description: <u>Mercedes E350</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(3)</u>
Line from Schedule A/B: <u>3.1</u>			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Official Form 106C
Debtor 1 Moussa**Schedule C: The Property You Claim as Exempt**Page 1 of 5

First Name

Middle Name

Last Name

Case number (if known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.
Brief description: <u>Nissan Quest</u>	\$ <u>3,800.00</u>	<input checked="" type="checkbox"/> \$ <u>3,800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(3)</u>
Line from Schedule A/B: <u>3.2</u>			
Brief description: <u>Household Goods</u>	\$ <u>6,750.00</u>	<input checked="" type="checkbox"/> \$ <u>6,750.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(4)</u>
Line from Schedule A/B: <u>6</u>			
Brief description: <u>Electronics</u>	\$ <u>525.00</u>	<input checked="" type="checkbox"/> \$ <u>525.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(4)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Wardrobe</u>	\$ <u>300.00</u>	<input checked="" type="checkbox"/> \$ <u>300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(4)</u>
Line from Schedule A/B: <u>11</u>			
Brief description: <u>Jewelry</u>	\$ <u>2,000.00</u>	<input checked="" type="checkbox"/> \$ <u>2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(4)</u>
Line from Schedule A/B: <u>12</u>			
Brief description: <u>Bank of America xxx4172</u>	\$ <u>12.40</u>	<input checked="" type="checkbox"/> \$ <u>12.40</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.1</u>			
Brief description: <u>Bank of America xxx4670</u>	\$ <u>154.93</u>	<input checked="" type="checkbox"/> \$ <u>154.93</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.2</u>			
Brief description: <u>Bank of America xxx8475</u>	\$ <u>9.91</u>	<input checked="" type="checkbox"/> \$ <u>9.91</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.3</u>			
Brief description: <u>Univ. of Wisc. CU xx7702</u>	\$ <u>134.22</u>	<input checked="" type="checkbox"/> \$ <u>134.22</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.4</u>			
Brief description: <u>Univ. of Wisc. CU xx7701</u>	\$ <u>173.18</u>	<input checked="" type="checkbox"/> \$ <u>173.18</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.5</u>			
Brief description: <u>Sun Trust xxx4107</u>	\$ <u>15,007.79</u>	<input checked="" type="checkbox"/> \$ <u>15,007.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.6</u>			

Debtor 1 Moussa _____ Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Bank of America xxx4482</u>	\$ <u>10.00</u>	<input checked="" type="checkbox"/> \$ <u>10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.7</u>			
Brief description: <u>New Dominion xxx3171</u>	\$ <u>3,417.40</u>	<input checked="" type="checkbox"/> \$ <u>3,417.40</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.8</u>			
Brief description: <u>Sun Trust xxx3943</u>	\$ <u>5.35</u>	<input checked="" type="checkbox"/> \$ <u>5.35</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.9</u>			
Brief description: <u>Fidelity Investments</u>	\$ <u>481.39</u>	<input checked="" type="checkbox"/> \$ <u>481.39</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>18</u>			
Brief description: <u>Int. in Gigi's Macaron LLC</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(2)</u>
Line from Schedule A/B: <u>19</u>			
Brief description: <u>Int. in Mus Macaron, LLC</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(2)</u>
Line from Schedule A/B: <u>19</u>			
Brief description: <u>Openheimer xxx4051</u>	\$ <u>121,401.43</u>	<input checked="" type="checkbox"/> \$ <u>121,401.43</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Patterson v. Shumate</u>
Line from Schedule A/B: <u>21</u>			
Brief description: <u>Fidelity IRA xxx4765</u>	\$ <u>.05</u>	<input checked="" type="checkbox"/> \$ <u>.05</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(9)</u>
Line from Schedule A/B: <u>21</u>			
Brief description: <u>Security Deposit</u>	\$ <u>3,898.67</u>	<input checked="" type="checkbox"/> \$ <u>3,898.67</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(2)</u>
Line from Schedule A/B: <u>22</u>			
Brief description: <u>NC 529 Plans</u>	\$ <u>8,988.43</u>	<input checked="" type="checkbox"/> \$ <u>8,988.43</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(10)</u>
Line from Schedule A/B: <u>24</u>			
Brief description: <u>Le Macaron Development</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(2)</u>
Line from Schedule A/B: <u>27</u>			

Debtor 1 Moussa _____ Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>State Farm Life x9485</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(6)</u>
Line from Schedule A/B: <u>31</u>			
Brief description: <u>State Farm Life x9577</u>	\$ <u>0.00</u>	<input checked="" type="checkbox"/> \$ <u>0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(6)</u>
Line from Schedule A/B: <u>31</u>			
Brief description: <u>3rd Party Claim</u>	\$ <u>3,500.00</u>	<input checked="" type="checkbox"/> \$ <u>3,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1601(a)(2)</u>
Line from Schedule A/B: <u>33</u>			
Brief description: <u>Bank of America xxx6349</u>	\$ <u>2.75</u>	<input checked="" type="checkbox"/> \$ <u>2.75</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.4</u>			
Brief description: <u>Bank of America xxx1036</u>	\$ <u>2.47</u>	<input checked="" type="checkbox"/> \$ <u>2.47</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.0</u>			
Brief description: <u>Bank of America xxx6352</u>	\$ <u>0.01</u>	<input checked="" type="checkbox"/> \$ <u>0.01</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.10</u>			
Brief description: <u>New Dominion xxx8388</u>	\$ <u>300.00</u>	<input checked="" type="checkbox"/> \$ <u>300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.12</u>			
Brief description: <u>Sun Trust xxx3950</u>	\$ <u>43.79</u>	<input checked="" type="checkbox"/> \$ <u>43.79</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.14</u>			
Brief description: <u>Sun Trust xxx5935</u>	\$ <u>1,000.00</u>	<input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.15</u>			
Brief description: <u>Sun Trust xxx5950</u>	\$ <u>175.00</u>	<input checked="" type="checkbox"/> \$ <u>175.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.16</u>			
Brief description: <u>Sun Trust xxx5943</u>	\$ <u>95.00</u>	<input checked="" type="checkbox"/> \$ <u>95.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>NCGS § 1-362</u>
Line from Schedule A/B: <u>17.17</u>			

Debtor 1	Moussa	Bamba	Case number (if known)
	First Name	Middle Name	Last Name
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description: Line from Schedule A/B:	\$ <u>14.78</u>	<input checked="" type="checkbox"/> \$ <u>14.78</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>22.72</u>	<input checked="" type="checkbox"/> \$ <u>22.72</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>5.00</u>	<input checked="" type="checkbox"/> \$ <u>5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>5.00</u>	<input checked="" type="checkbox"/> \$ <u>5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>10.00</u>	<input checked="" type="checkbox"/> \$ <u>10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>347.16</u>	<input checked="" type="checkbox"/> \$ <u>347.16</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ <u>318.62</u>	<input checked="" type="checkbox"/> \$ <u>318.62</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NCGS § 1-362
Brief description: Line from Schedule A/B:	\$ _____	<input checked="" type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input checked="" type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input checked="" type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input checked="" type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1	<u>Moussa</u> First Name	<u>Bamba</u> Middle Name	<u></u> Last Name
Debtor 2 (Spouse, if filing)	<u>Hortense</u> First Name	<u>Gisele</u> Middle Name	<u>Spuoselast</u> Last Name
United States Bankruptcy Court for the:	<u>Western</u>	District of <u>North Carolina</u> (State)	
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion of any
--	--	--------------------------------------

2.1	Bank of America Creditor's Name <u>4909 Savarese Circle</u> Number Street	Describe the property that secures the claim: <u>15119 Callow Forest Dr., Charlotte, NC 28273</u>	\$ <u>246,292.00</u>	\$ <u>296,868.00</u>	\$ _____
-----	---	--	----------------------	----------------------	----------

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one. **Nature of lien.** Check all that apply.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2
 At least one of the debtors and another
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Check if this claim relates to a community debt

Date debt was incurred 6/1/13 Last 4 digits of account number 6 7 9 8

2.2	Truliant Creditor's Name <u>3200 Truliant Way</u> Number Street	Describe the property that secures the claim: <u>2008 Mercedes E350</u>	\$ <u>11,101.00</u>	\$ <u>4,000.00</u>	\$ <u>7,101.00</u>
-----	---	--	---------------------	--------------------	--------------------

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one. **Nature of lien.** Check all that apply.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2
 At least one of the debtors and another
 An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Check if this claim relates to a community debt

Date debt was incurred _____ Last 4 digits of account number 4 0 0 0

Add the dollar value of your entries in column A on this page. Write that number here:

\$ 257,393.00

Official Form 106D
Debtor 1 **Moussa**

Schedule D: Creditors Who Have Claims Secured by Property

Case number (if known) _____

Page 1 of 2

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion of any
2.3	Wells Fargo Home Mortgage	Describe the property that secures the claim:	\$ <u>125,616.00</u>	\$ <u>130,200.00</u>
Creditor's Name		Number Street		
<u>PO Box 10335</u>		<u>206 Oakton Glen, Charlotte, NC 28262</u>		
City <u>Des Moines, Iowa</u> State <u>50306</u> Zip Code				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. Nature of lien. Check all that apply.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input checked="" type="checkbox"/> At least one of the debtors and another				
<input checked="" type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred _____ Last 4 digits of account number <u>4 7 6 9</u>				
2.4	Describe the property that secures the claim:	\$ _____	\$ _____	\$ _____
Creditor's Name				
Number Street				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. Nature of lien. Check all that apply.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred _____ Last 4 digits of account number _____				
2.5	Describe the property that secures the claim:	\$ _____	\$ _____	\$ _____
Creditor's Name				
Number Street				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who owes the debt? Check one. Nature of lien. Check all that apply.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred _____ Last 4 digits of account number _____				
Add the dollar value of your entries in column A on this page. Write that number here: \$ <u>125,616.00</u>				
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ <u>383,009.00</u>				

Official Form 106D
Debtor 1 **Moussa**
First Name

Additional Page of **Schedule D: Creditors Who Have Claims Secured by Property**
Bamba
Middle Name
Last Name

Case number (if known)

Page 2 of 2

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

	Name
--	------

Name

Number Street

City State Zip Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Official Form 106D

Part 2 of Schedule D: Creditors Who Have Claims Secured by Property

Page 3 of 3

Fill in this information to identify your case:

Debtor 1	Moussa First Name	Bamba Middle Name	Bamba Last Name
Debtor 2 (Spouse, if filing)	Hortense First Name	Gisele Middle Name	Bamba Last Name
United States Bankruptcy Court for the:	Western	District of (State)	North Carolina
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your Priority Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
(for an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Last 4 digits of account number	Total claim	Priority amount	Nonpriority amount
2.1	Priority Creditor's Name	\$	\$	\$
	Number Street	When was the debt incurred?		
	City State Zip Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Taxes and certain other debts you owe the government		
	<input type="checkbox"/> Debtor 1 and Debtor 2	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes			
2.2	Priority Creditor's Name	\$	\$	\$
	Number Street	When was the debt incurred?		
	City State Zip Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Domestic support obligations		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Taxes and certain other debts you owe the government		
	<input type="checkbox"/> Debtor 1 and Debtor 2	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Official Form 106E/F

Debtor 1 **Moussa**

First Name

Middle Name

Last Name

Schedule E/F: Creditors Who Have Unsecured ClaimsPage 1 of 15

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims, fill out the Continuation Page of Part 2.

(for an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim

4.1	American Express Nonpriority Creditor's Name PO Box 981537 Number Street El Paso, TX 79998 City State Zip Code	Last 4 digits of account number <u>1 0 0 9</u> \$ <u>13,843.43</u>
When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.2	Bank of America Nonpriority Creditor's Name PO Box 15796 Number Street Wilmington, DE 19886-5796 City State Zip Code	Last 4 digits of account number <u>7 6 9 7</u> \$ <u>9,464.85</u>
When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.3	Bank of America Nonpriority Creditor's Name PO Box 982238 Number Street El Paso, TX 79998 City State Zip Code	Last 4 digits of account number <u>2 6 8 1</u> \$ <u>12,581.84</u> When was the debt incurred? <u>10/1/15</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Official Form 106E/F

Debtor 1 **Moussa**

First Name

Middle Name

Last Name

Schedule E/F: Creditors Who Have Unsecured ClaimsPage 2 of 15

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth			Total claim
4.4 <u>Banker's Healthcare Group</u>	Last 4 digits of account number	<u>0 2 8 9</u>	\$ <u>2,355.00</u>
PO Box 332509 Number Street	When was the debt incurred?		
Murfreesboro, TN 37133 City State Zip Code	As of the date you file, the claim is: Check all that apply.		
<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans		
<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.		
<input checked="" type="checkbox"/> No	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
4.5 <u>Barclays Bank, DE</u>	Last 4 digits of account number	<u>0 2 4 9</u>	\$ <u>12,507.00</u>
Nonpriority Creditor's Name	When was the debt incurred?		
PO Box 8803 Number Street	As of the date you file, the claim is: Check all that apply.		
Wilmington, DE 19899 City State Zip Code	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 and Debtor 2	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Student loans		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.		
<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> No	<input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
<input checked="" type="checkbox"/> Yes			
4.6 <u>Barclays Bank, DE</u>	Last 4 digits of account number	<u>0 2 5 2</u>	\$ <u>12,761.00</u>
Nonpriority Creditor's Name	When was the debt incurred?		
PO Box 8803 Number Street	As of the date you file, the claim is: Check all that apply.		
Wilmington, DE 19899 City State Zip Code	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 and Debtor 2	Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Student loans		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.		
<input type="checkbox"/> Is the claim subject to offset?	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>		
<input type="checkbox"/> Yes			

Debtor 1 Moussa _____ Case number (if known) _____
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth				Total claim
4.7 <u>BB&T</u>	Nonpriority Creditor's Name <u>PO Box 2306</u> Number Street <u>Wilson, NC 27894</u> City State Zip Code	Last 4 digits of account number <u>1 6 0 8</u>	When was the debt incurred? <u>4/1/13</u>	\$ <u>6,403.00</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>				
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.8 <u>BHG</u>	Nonpriority Creditor's Name <u>PO Box 306005</u> Number Street <u>Nashville, TN 37230-6005</u> City State Zip Code	Last 4 digits of account number <u> </u>	When was the debt incurred? <u> </u>	\$ <u>2,440.84</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>				
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes				
4.9 <u>Capital One</u>	Nonpriority Creditor's Name <u>15000 Capital One Dr.</u> Number Street <u>Richmond, VA 23238</u> City State Zip Code	Last 4 digits of account number <u>5 4 1 7</u>	When was the debt incurred? <u>11/1/15</u>	\$ <u>9,594.07</u>
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>				
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Moussa

First Name

Middle Name

Bamba

Last Name

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth				Total claim
4.10	Capital One	Nonpriority Creditor's Name 15000 Capital One Dr.	Number Street	Last 4 digits of account number <u>7 8 0 5</u> \$ 2,980.39
				When was the debt incurred? <u>10/1/15</u>
				As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes				
4.11	Capital One	Nonpriority Creditor's Name 15000 Capital One Dr.	Number Street	Last 4 digits of account number <u>4 7 0 9</u> \$ 14,047.00
				When was the debt incurred? <u>10/1/15</u>
				As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.12	Carmel Family Physicians	Nonpriority Creditor's Name PO Box 70826	Number Street	Last 4 digits of account number <u>9 8 0 0</u> \$ 149.10
				When was the debt incurred? <u>5/30/17</u>
				As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical services</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.13 CBNA Last 4 digits of account number 0 1 1 6 \$ 1,928.00

Nonpriority Creditor's Name

50 Northwest Point Rd.

Number Street

When was the debt incurred?

8/1/2000

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Elk Grove Village, IL 60007

City

State

Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.14 Chase Last 4 digits of account number 2 3 3 3 \$ 7,368.25

Nonpriority Creditor's Name

PO Box 15123

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Wilmington, DE 19850-5123

City

State

Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.15 Citi Last 4 digits of account number 4 1 8 1 \$ 5,304.50

Nonpriority Creditor's Name

PO Box 6241

Number Street

When was the debt incurred?

10/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Sioux Falls, SD 57117

City

State

Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Debtor 1 Moussa Middle Name Bamba Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.16	<u>Citi</u> Nonpriority Creditor's Name <u>PO Box 6241</u> Number Street <u>Sioux Falls, SD 57117</u> City State Zip Code	Last 4 digits of account number <u>2 4 1 8</u>	\$ <u>9,668.00</u>
		When was the debt incurred? <u>10/1/15</u>	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u></p>			
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
4.17	<u>Comenity/AMRTV</u> Nonpriority Creditor's Name <u>PO Box 182789</u> Number Street <u>Columbus, OH 43218</u> City State Zip Code	Last 4 digits of account number <u>3 x</u>	\$ <u>314.00</u>
		When was the debt incurred? <u>4/1/2002</u>	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card</u></p>			
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
4.18	<u>Credit First, NA</u> Nonpriority Creditor's Name <u>6275 Eastland Rd.</u> Number Street <u>Brookpark, OH 44142</u> City State Zip Code	Last 4 digits of account number <u>6 6 3 4</u>	\$ <u>0.00</u>
		When was the debt incurred? <u>8/1/2010</u>	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims. <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Notice Only</u></p>			
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.19 Discover Last 4 digits of account number 3 8 9 0 \$ 4,475.00

Nonpriority Creditor's Name

PO Box 15316

Number Street

Wilmington, DE 19850

City State Zip Code

When was the debt incurred?

11/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.20 Discover Last 4 digits of account number 3 8 6 0 \$ 7,429.18

Nonpriority Creditor's Name

PO Box 15316

Number Street

Wilmington, DE 19850

City State Zip Code

When was the debt incurred?

10/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.21 Fifth Third Bank Last 4 digits of account number 1 0 6 1 \$ 11,818.75

Nonpriority Creditor's Name

PO Box 740789

Number Street

Cincinnati, OH 45274-0789

City State Zip Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.22 Navient Last 4 digits of account number 2 9 3 5 \$ 5,475.00

Nonpriority Creditor's Name

123 S. Justison St.

Number Street

Ste. 30

Wilmington, DE 19801

City State Zip Code

When was the debt incurred?

11/1/06

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify _____

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.23 Pentagon Federal Credit Union

Last 4 digits of account number 0 6 7 9 \$ 3,628.00

Nonpriority Creditor's Name

PO Box 1432

Number Street

When was the debt incurred?

10/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Revolving

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.24 Pinnacle Bank

Last 4 digits of account number 4 6 5 6 \$ 2,440.00

Nonpriority Creditor's Name

114 W. College St.

Number Street

When was the debt incurred?

7/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Revolving

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.25 State Farm Nonpriority Creditor's Name **3 State Farm Plaza** Number Street **N-4** City **Bloomington, IL 61791** State **Zip Code** **Last 4 digits of account number** **7 0 1 8** \$ **\$ 12,480.00**

When was the debt incurred? **11/1/15**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit card**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only

- Debtor 1 and Debtor 2
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.26 Syncb/Amazon Nonpriority Creditor's Name **PO Box 965015** Number Street **Orlando, FL 32896** City **State Zip Code** **Last 4 digits of account number** **4 5 7 8** \$ **\$ 3,971.00**

When was the debt incurred? **7/1/13**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit card**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only

- Debtor 1 and Debtor 2
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.27 Syncb/Haverty's Nonpriority Creditor's Name **950 Forrer Blvd.** Number Street **Kettering, OH 45420** City **State Zip Code** **Last 4 digits of account number** **1 9 1 9** \$ **\$ 0.00**

When was the debt incurred? **3/1/11**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Credit card**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only

- Debtor 1 and Debtor 2
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Official Form 106E/F
Debtor 1 Moussa
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.28 Syncb/Lowe's Last 4 digits of account number 8 1 9 2 \$ 2,817.00

Nonpriority Creditor's Name

PO Box 965005

Number Street

When was the debt incurred?

8/1/14

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Orlando, FL 32896

City State Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.29 Truliant Last 4 digits of account number 1 2 5 1 \$ 9,906.00

Nonpriority Creditor's Name

3200 Truliant Way

Number Street

When was the debt incurred?

5/1/08

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Winston-Salem, NC 27103

City State Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.30 USAA Last 4 digits of account number 7 0 8 2 \$ 7,291.00

Nonpriority Creditor's Name

PO Box 47504

Number Street

When was the debt incurred?

11/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

San Antonio, TX 78265

City State Zip Code

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth

Total claim

4.31 US Dept. of Education

Nonpriority Creditor's Name

PO Box 7860

Number Street

Madison, WI 53707

City State Zip Code

Last 4 digits of account number

9 2 7 9

\$ 3,838.00

When was the debt incurred?

10/1/09

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify _____

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.32 UW Credit Union

Nonpriority Creditor's Name

3500 University Ave.

Number Street

Last 4 digits of account number

3 9 3 7

\$ 13,939.00

When was the debt incurred?

10/1/04

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

4.33 Wells Fargo

Nonpriority Creditor's Name

PO Box 14517

Number Street

Last 4 digits of account number

8 8 4 4

\$ 3,552.97

When was the debt incurred?

10/1/15

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims.

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Credit card

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2

At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 2: Your NONPRIORITY Unsecured Claims -- Continuation

After listing any entries on this page, number them beginning with 4.4, followed by 4.5 and so forth			Total claim
4.34	Wood Forest Bank Nonpriority Creditor's Name	Last 4 digits of account number	6 6 9 9 \$ 2,196.42
When was the debt incurred?			
Number Street PO Box 790408			As of the date you file, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent
			<input type="checkbox"/> Unliquidated
			<input type="checkbox"/> Disputed
City State Zip Code St. Louis, MO 63179-0408			Type of NONPRIORITY unsecured claim:
			<input type="checkbox"/> Student loans
			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
			<input checked="" type="checkbox"/> Other. Specify <u>Credit card</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.35	Nonpriority Creditor's Name	Last 4 digits of account number	\$
When was the debt incurred?			
Number Street 			As of the date you file, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent
			<input type="checkbox"/> Unliquidated
			<input type="checkbox"/> Disputed
City State Zip Code 			Type of NONPRIORITY unsecured claim:
			<input type="checkbox"/> Student loans
			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
			<input type="checkbox"/> Other. Specify _____
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
4.36	Nonpriority Creditor's Name	Last 4 digits of account number	\$
When was the debt incurred?			
Number Street 			As of the date you file, the claim is: Check all that apply.
			<input type="checkbox"/> Contingent
			<input type="checkbox"/> Unliquidated
			<input type="checkbox"/> Disputed
City State Zip Code 			Type of NONPRIORITY unsecured claim:
			<input type="checkbox"/> Student loans
			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims.
			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts
			<input type="checkbox"/> Other. Specify _____
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Official Form 106E/F
Debtor 1 **Moussa**
First Name Middle Name Last Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

On which line in Part 1 did you enter the creditor?

Name _____

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims

Number Street _____

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

City _____ State _____ Zip Code _____

Official Form 106E/F
Debtor 1 **Moussa**
First Name

Schedule E/F: Creditors Who Have Unsecured Claims
Bamba

Case number (if known)

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

Total claims from Part 1

6a. Domestic support obligations 6a. \$ 0.00

6b. Taxes and certain other debts you owe the government 6b. \$ 0.00

6c. Claims for death or personal injury while you were intoxicated 6c. \$ 0.00

6d. Other. Add all other priority unsecured claims.
Write that amount here. 6d. + \$ 0.00

6e. Total. Add lines 6a through 6d. 6e. \$ 0.00

Total claims from Part 2

6f. Student loans 6f. \$ 9,313.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. \$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$ 0.00

6i. Other. Add all other nonpriority unsecured claims.
Write that amount here. 6i. + \$ 209,654.99

6j. Total. Add lines 6f through 6i. 6j. \$ 218,967.99

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 15 of 15

Fill in this information to identify your case:

Debtor 1	<u>Moussa</u> First Name	<u>Bamba</u> Middle Name	<u>Bamba</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Hortense</u> First Name	<u>Spuosemiddle</u> Middle Name	<u>Bamba</u> Last Name
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>North Carolina</u> (State)
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B)

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	<u>Le Macaron Development LLC</u> Name <u>2300 Bee Ridge Rd., Ste. 401</u> Number Street <u>Sarasota, FL 34239</u> City State Zip Code		
	Franchise agreement		
2.2	<u>Metropolitan Realty Co. LLC</u> Name <u>c/o Bayer Properties LLC</u> Number Street <u>2222 Arlington Ave. Ste. 120</u> <u>Birmingham, AL 35205</u> City State Zip Code		
	Commercial lease at \$ 5,308.99		
2.3	Name <u>Number Street</u> <u>City State Zip Code</u>		
2.4	Name <u>Number Street</u> <u>City State Zip Code</u>		
2.5	Name <u>Number Street</u> <u>City State Zip Code</u>		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this information to identify your case:

Debtor 1	Moussa First Name	Bamba Middle Name	Bamba Last Name
Debtor 2 (Spouse, if filing)	Hortense First Name	Gisele Middle Name	Bamba Last Name
United States Bankruptcy Court for the:	Western	District of North Carolina (State)	
Case number (if known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes. In which community state or territory did you live?

Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Ms. Obroh Zaguehi**
 Name
206 Oakton Glen
 Number Street
Charlotte, NC 28262
 City State Zip Code

Schedule D, line 1.2

Schedule E/F, line _____

Schedule G, line _____

3.2 **Louis Toh**
 Name
 Number Street
Charlotte, NC
 City State Zip Code

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line 4.22

3.3
 Name
 Number Street
 City State Zip Code

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Moussa	Bamba
	First Name	Middle Name
		Last Name
Debtor 2 (Spouse, if filing)	Hortense	Gisele
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the:	Western	District of North Carolina (State)
Case number (if known)		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I**Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if that applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Self	
Employer's name		
	Number Street	Number Street
	City State Zip Code	City State Zip Code
How long employed there?	10 mos	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross income. Add line 2 + line 3

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$ _____	\$ _____
3. + \$ _____	\$ _____
4. \$ 0.00	\$ 0.00

Official Form 106I
Debtor 1 **Moussa****Schedule I: Your Income**
Bamba

Page 1

Case number (if known) _____

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....->	4. \$ <u>0.00</u>	\$ <u>0.00</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____
5e. Insurance	5e. \$ _____	\$ _____
5f. Domestic support obligations	5f. \$ _____	\$ _____
5g. Union dues	5g. \$ _____	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ _____	\$ _____
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ _____	\$ _____
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>3,590.94</u>	\$ <u>0.00</u>
8b. Interest and dividends	8b. \$ _____	\$ _____
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____
8d. Unemployment compensation	8d. \$ _____	\$ _____
8e. Social Security	8e. \$ _____	\$ _____
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ _____	\$ _____
8g. Pension or retirement income	8g. \$ _____	\$ _____
8h. Other monthly income. Specify: _____	8h. + \$ _____	\$ _____
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>3,590.94</u>	\$ <u>0.00</u>
10. Calculate monthly income. Add line 7 + line 9.	10. \$ <u>3,590.94</u>	+ \$ <u>0.00</u> = \$ <u>3,590.94</u>
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$ _____	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.		
Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. \$ <u>3,590.94</u>	
	Combined monthly income	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	Moussa	Bamba
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Hortense	Gisele
	First Name	Middle Name
United States Bankruptcy Court for the:	Western	District of North Carolina (State)
Case number (if known)		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?** No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.**2. Do you have dependents?**Do not list Debtor 1 and
Debtor 2 No Yes. Fill out this information for
each dependent.....Dependent's relationship to
Debtor 1 or Debtor 2Dependent's
ageDoes dependent live
with you? No Yes No Yes No Yes No Yes No Yes**3. Do your expenses include**expenses of people other than
yourself and your dependents? No
 Yes**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106i.)

Your expenses**4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.**4. \$ 1310.00**If not included in line 4:**

4a. Real estate taxes

4a. \$ _____

4b. Property, homeowner's, or renter's insurance

4b. \$ _____

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 202.22

4d. Homeowner's association or condominium dues

4d. \$ 41.00

Your expenses**5. Additional mortgage payments for your residence**, such as home equity loans

5. \$ _____

6. Utilities:

6a. Electricity, heat, natural gas

6a. \$ **312.89** _____

6b. Water, sewer, garbage collection

6b. \$ **96.03** _____

6c. Telephone, cell phone, Internet, satellite, and cable services

6c. \$ **312.78** _____

6d. Other. Specify: _____

6d. \$ _____

7. Food and housekeeping supplies7. \$ **1406.68** _____**8. Childcare and children's education costs**

8. \$ _____

9. Clothing, laundry, and dry cleaning9. \$ **277.62** _____**10. Personal care products and services**10. \$ **100.00** _____**11. Medical and dental expenses**11. \$ **18.50** _____**12. Transportation.** Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ **308.37** _____**13. Entertainment, clubs, recreation, newspapers, magazines, and books**13. \$ **169.99** _____**14. Charitable contributions and religious donations**14. \$ **400.00** _____**15. Insurance.** Include first mortgage payments

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance

15a. \$ **42.00** _____

15b. Health insurance

15b. \$ _____

15c. Vehicle insurance

15c. \$ **374.73** _____

15d. Other insurance. Specify: _____

15d. \$ _____

16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.

Specify: _____

16. \$ **260.14** _____**17. Installments or lease payments:**

17a. Car payments for Vehicle 1

17a. \$ **346.00** _____

17b. Car payments for Vehicle 2

17b. \$ _____

17c. Other. Specify: _____

17c. \$ _____

17d. Other. Specify: **student loans**17d. \$ **134.03** _____**18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)**

18. \$ _____

19. Other payments you make to support others who do not live with you.

Specify: _____

19. \$ _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property

20a. \$ _____

20b. Real estate taxes

20b. \$ _____

20c. Property, homeowner's or renter's insurance

20c. \$ _____

20d. Maintenance, repair, and upkeep expenses

20d. \$ _____

20e. Homeowner's association or condominium dues

20e. \$ _____

Official Form 106J

Debtor 1

Moussa

First Name

Middle Name

Schedule J: Your Expenses

Bamba

Last Name

Case number (if known) _____

21. Other. Specify: _____

21. + \$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

22a. \$ 6,071.98

22b. \$ _____

22c. \$ 6,071.98**23. Calculate your monthly net income.**23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.23a. \$ 3,590.94

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 6,071.98

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.23c. \$ -2,522.04**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

- No.
 Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1	Moussa First Name	Bamba Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Hortense First Name	Gisele Middle Name	Bamba Last Name
United States Bankruptcy Court for the:	Western	District of	North Carolina (State)
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum**Summary of your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	<i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ <u>50,576.00</u>
1b.	Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>172,912.40</u>
1c.	Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$ 223,488.40</u>

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	<i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a.	Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ <u>383,009.00</u>
3.	<i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ <u>218,967.99</u>
		Your total liabilities
		<u>\$ 601,976.99</u>

Part 3: Summarize Your Income and Expenses

4.	<i>Schedule I: Your Income</i> (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ <u>3,590.94</u>
5.	<i>Schedule J: Your Expenses</i> (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ <u>6,071.98</u>

Official Form 106Sum
Debtor 1
First Name **Moussa****Summary of Your Assets and Liabilities and Certain Statistical Information**Middle Name **Bamba**Last Name
Case number (if known)

Page 1 of 2

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13**

- No. You have nothing else to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debts do you have?

- Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11, OR, Form 122B Line 11; OR, Form 122C-1 Line 14.\$ 0.00**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F****Total claim****From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>9,313.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h)	+ \$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>9,313.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Moussa</u> First Name	<u>Bamba</u> Middle Name	<u>Bamba</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Hortense</u> First Name	<u>Gisele</u> Middle Name	<u>Bamba</u> Last Name
United States Bankruptcy Court for the:	<u>Western</u>	District of	<u>North Carolina</u> (State)
Case number	<hr/> <u>(if known)</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ M. Bamba
Signature of Debtor 1

X /s/ H. Bamba
Signature of Debtor 2

Date 09/28/2017
MM / DD / YYYY

Date 09/28/2017
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	<u>Moussa</u>	<u>Bamba</u>
	First Name	Middle Name
		Last Name
Debtor 2 (Spouse, if filing)	<u>Hortense</u>	<u>Gisele</u>
	First Name	Middle Name
		Last Name
United States Bankruptcy Court for the:	<u>Western</u>	District of <u>North Carolina</u> (State)
Case number (if known)		

Check if this is an amended filing

Official Form 108**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- * creditors have claims secured by your property, or
- * you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured By Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intent to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>Bank of America</u> Description of property securing debt: <u>15119 Callow Forest dr. Charlotte, NC 28273</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Creditor's name: <u>Wells Fargo Home Mortgage</u> Description of property securing debt: <u>206 Oakton Glen Charlotte, NC 28262</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Creditor's name: <u>Truliant</u> Description of property securing debt: <u>2008 Mercedes E350</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Creditor's name: Description of property securing debt:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Official Form 108

Debtor 1

Moussa

First Name

Statement of Intention for Individuals Filing Under Chapter 7

Bamba

Middle Name

Last Name

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: <u>Metropolitan Realty Co. ???</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property: 1111 Metropolitan Ave., Ste. 120, Charlotte, NC 28204 ???	
Lessor's name: <u>Franchise ???</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	
Lessor's name: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property:	

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ M. Bamba

Signature of Debtor 1

Date 09/29/2017

MM / DD / YYYY

X /s/ H. Bamba

Signature of Debtor 2

Date 09/29/2017

MM / DD / YYYY

United States Bankruptcy CourtWestern

District of

North Carolina, Charlotte Division**In re****Debtor** Moussa BambaCase No. _____
Chapter 7**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$1,500.00</u>
Prior to the filing of this statement I have received.....	<u>\$1,500.00</u>
Balance Due.....	<u>\$0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify): _____

3. The source of compensation to be paid to me is:

Debtor Other (specify): _____

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with an other person or persons who are not members or associates of my law firm.

A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

9/29/2017

Date

/s/ BLWhite

Signature of Attorney

Barbara L. White, Attorney at Law

Name of Law Firm

**United States Bankruptcy Court
Western District of North Carolina, Charlotte Division**

In re: Moussa Bamba

Case No.

Debtor

(If known)

CERTIFICATION OF MAILING MATRIX CREDITOR LIST

I hereby certify that the attached Mailing Matrix Creditor List, which consists of 3 pages, is true, correct and complete to the best of my knowledge.

Date: 09/29/2017

Signature: /s/ M. Bamba

Debtor

Date: 09/29/2017

Signature: /s/ H. Bamba

Joint Debtor, if any

(If joint case, both spouses must sign)

U.S. Attorney's Office
227 W. Trade St., Suite 1700
Charlotte, NC 28202

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101

NC Department of Revenue
PO Box 1168
Raleigh, NC 27602

City-County Tax Collector
PO Box 31637
Charlotte, NC 28231

American Express
PO Box 981537
El Paso, TX 79998

Bank of America
4909 Savarese Circle
Tampa, FL 33634

Bank of America
PO Box 15796
Wilmington, DE 19886-5796

Bank of America
PO Box 982238
El Paso, TX 79998

Banker's Healthcare Group
PO Box 332509
Murfreesboro, TN 37133

Barclays Bank, DE
PO Box 8803
Wilmington, DE 19899

BB&T
PO Box 2306
Wilson, NC 27894

BHG
PO Box 306005
Nashville, TN 37230-6005

Capital One
15000 Capital One Dr.
Richmond, VA 23238

Carmel Family Physicians
PO Box 70826
Charlotte, NC 28272-0826

CBNA
50 Northwest Point Rd.
Elk Grove Village, IL 60007

Chase
PO Box 15123
Wilmington, DE 19850-5123

Citi
PO Box 6241
Sioux Falls, SD 57117

Comenity/AMRTV
PO Box 182789
Columbus, OH 43218

Credit First, NA
6275 Eastland Rd.
Brookpark, OH 44142

Discover
PO Box 15316
Wilmington, DE 19850

Fifth Third Bank
PO Box 740789
Cincinnati, OH 45274-0789

Navient
123 S. Justison St.
Ste. 30
Wilmington, DE 19801

Pentagon Federal Credit Union
PO Box 1432
Alexandra, VA 22313

Pinnacle Bank
114 W. College St.
Murfreesboro, TN 37130

State Farm
3 State Farm Plaza
N-4
Bloomington, IL 61791

Syncb/Amazon
PO Box 965015
Orlando, FL 32896

Syncb/Haverty's
950 Forrer Blvd.
Kettering, OH 45420

Syncb/Lowe's
PO Box 965005
Orlando, FL 32896

Truliant
3200 Truliant Way
Winston-Salem, NC 27103

USAA
PO Box 47504
San Antonio, TX 78265

US Dept. of Education
PO Box 7860
Madison, WI 53707

UW Credit Union
3500 University Ave.
Madison, WI 53705

Wells Fargo
PO Box 14517
Des Moines, IA 50306

Wells Fargo Home Mortgage
PO Box 10335

Wood Forest Bank
PO Box 790408
St. Louis, MO 63179-0408